ARKANSAS INSURANCE DEPARTMENT RATE FILING ABSTRACT

Form RF-1 Rev. 4/98

Year Policy Count % Eff. Date Premit 2000 517 48.5° N-3/15, R-4/15 251.3 2002 1.521 +12.6 10/15 359.9 2003 2.389 +9.9% N-2/15, R-3/15 2.237.8	N Apply Lost Cost Factors to Future Filings? (Y or N) +0.8% Estimated Maximum Rate Increase for any Arkansas Insured (%) Estimated Maximum Rate Decrease for any Arkansas Insured (%) 5 Year Hist	TOTAL OVERALL EFFECT	- Premium Modifier - Owner Occupied Dwelling - Two Family Dwelling	- Territory Modifications - Coverage A - Dwelling: - Base Rates - Vacant Rates	Basics Dwelling and Homeowners	(1) LINE OF INSURANCE By Coverage	Insurer Name: Foremost Insurance Company Grand Rapids, Michigan NAIC Number: 212-11185 Name of Advisory Organization Whose Filing You Are Referencing not applicable Co. Affiliation to Advisory Organization: MemberSubscriberService F Reference Filing #:Proposed Effective Date:
AR Earned Losses (000) Premlum (000) 230.5 51.3 230.5 199.6 369.3 27.6.9 639.3 237.8 577.9	nsured (%) Insured (%)	+9.9%			+9.9%	(2) Indicated % Rate Level Change	Rapids, Michigan Ou Are Referencing arSubscriber Proposed Effe
(000) Arkansas Loss Ratio 92% 55% 55% 43% 26%		+0.8%	-1.0% *	+1.5%		(3) Requested % Rate Level Change	
Countrywide toss Ratio 65% 65% 53% 44% 40%						(4) Expected Loss Ratio	urchaser
حقن ت سانت		N/A			N/A	(5) Loss Cost Modification Factor	Contact Person: Signature: Telephone No:
Total Production Expense General Expense Taxes, License & Fees Underwriting Profil & Contingencies Other (explain) TOTAL	Corresponds to (N/A			N/A	FOR LOSS COSTS (6) (5) Cost Selected ation Loss Cost Multiplier	Son: Kaan K Cidani Vo: 616-956-3645
	Corresponds to Question 3 on RF-2 or RF-WC	N/A			N/A	ONLY (7) Expense Constant (If Applicable)	idanli 1645
0	F-2 or RF-WC Selected Provisions	N/A			N/A	(8) Co. Current Loss Cost Multiplier	

NOV 2 2005

No changes for Homeowners.

